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CONFIRMATION NO. 2131

| SERIAL NUMBER  | FILING OR 371(c) DATE   | CLASS   | GROUP ART UNIT       | ATTORNEY DOCKET NO. |  |
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| 09/839,646   | 04/20/2001  | 717   | 2124                 | 30013630-0014       |  |
| <b>APPLICANTS</b><br>Dietrich Charisius, Stuttgart, GERMANY;<br>Alexander Aptus, Esslingen, GERMANY;   |   |   |                      |                     |  |
| <b>** CONTINUING DATA *****</b><br>This appln claims benefit of 60/199,046 04/21/2000 and is a CIP of 09/680,063 10/04/2000 which claims benefit of 60/157,826 10/05/1999 and claims benefit of 60/199,046 04/21/2000<br><i>TF part of provisional app</i><br><i>still investigating 09/680,063 - LOST</i> |   |   |                      |                     |  |
| <b>** FOREIGN APPLICATIONS *****</b>   |   |   |                      |                     |  |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b><br><b>** 06/13/2001</b>   |   |   |                      |                     |  |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no   |   | STATE OR COUNTRY<br>GERMANY                   | SHEETS DRAWING<br>56 | TOTAL CLAIMS<br>161 | INDEPENDENT CLAIMS<br>18                                       |
| 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met   |   |   |                      |                     |  |
| Verified and Acknowledged <input type="checkbox"/> yes <input checked="" type="checkbox"/> no  |   | Examiner's Signature <i>N. Aptus</i> Initials |                      |                     |  |
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| <b>TITLE</b><br>Methods and systems for supporting and deploying distributed computing components  |   |   |                      |                     |  |
| <b>FILING FEE RECEIVED</b><br>2289   | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: |   |                      |                     | <input type="checkbox"/> All Fees                              |
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